01/12/2009 17:18

(Rev. 12/2004)

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### **FEC** FORM 3X

than previously

C00355388

April 15

July 15

(TER)

Covering Period

Signature of Treasurer

Office

Use

Only

(Choose One)

1. NAME OF

### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines National Italian American Political Action Committee 1205 Locust Street ADDRESS (number and street) Suite 100 Check if different Philadelphia PA 19107 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report in the 04 2008 11 Election on State of 10 16 2008 24 2008 11 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JOSEPH A. AUTERI Type or Print Name of Treasurer Electronically Filed by JOSEPH A. AUTERI 0 1 12 2008 Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. **FEC FORM 3X** 

FE6AN026

FEC Form 3X (Rev. 02/2003)

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name National Italian American Political Action Committee <sup>®</sup> D " D 24 1.0 16 2008 1,1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 33486.74 2008 January 1 (b) Cash on Hand at 10491.79 Begining of Reporting Period ..... 36564.04 109575.86 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 47055.83 143062.60 6(a) and 6(c) for Column B) ..... 25421.89 121428.66 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 21633.94 21633.94 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 10000.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E street, NW Washington, DC 20463

> > Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Italian American Political Action Committee

Report Covering the Period:

From:

Ш

м м 1 0 <sup>D</sup> 16

<sup>Y</sup> 2 0 0 8

To:

м м 1 1 <sup>D</sup> 2 4

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	25530.00	85909.80
	(ii) Unitemized	3375.00	9585.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	28905.00	95494.80
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	2400.00	8800.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	31305.00	104294.80
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1348.03	1348.03
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	3911.01	3933.03
8.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36564.04	109575.86
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	36564.04	109575.86

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

**COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 17990.64 112997.41 Expenditures..... (c) Total Operating Expenditures 17990.64 112997.41 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 1000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 27. Loans Made..... 0.00 28. Refunds of Contributions To: Individuals/Persons Other 3300.00 3300.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 3300.00 3300.00 (add Lines 28(a), (b), and (c)) ......... 4131.25 4131.25 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 25421.89 121428.66 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 25421.89 121428.66 from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	31305.00	104294.80
34.	Total Contribution Refunds (from Line 28(d))	3300.00	3300.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	28005.00	100994.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17990.64	112997.41
37.	Offsets to Operating Expenditures (from Line 15, page 3)	1348.03	1348.03
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	16642.61	111649.38

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political A	d Statements may not be sold or used by any pers the name and address of any political committee to Action Committee	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BARBARA AUGUSTINE Mailing Address PO BOX 347  City SKIPPACK  FEC ID number of contributing federal political committee.  Name of Employer Golf Outing Productions	State Zip Code PA 19474  C Occupation Owner	Date of Receipt  10 30 2008  Transaction ID: SA11Al.8257  Amount of Each Receipt this Period  200.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) Gail H. Avicolli Mailing Address 3137 S. 18th Street		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Philadelphia  FEC ID number of contributing federal political committee.	State Zip Code PA 19145  C	Amount of Each Receipt this Period  525.00
Name of Employer Phila Performing Arts Cha- rter School Receipt For:  Primary General Other (specify) ▼	Occupation Principal  Aggregate Year-to-Date ▼  525.00	
Full Name (Last, First, Middle Initial) CATHERINE M. BAGGIANO Mailing Address 120 HILLVIEW DRI	VE	Date of Receipt  10 30 2008
City SPRINGFIELD	State Zip Code PA 19064	Transaction ID: SA11AI.8250  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer SELF EMPLOYED	Occupation ATTORNEY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SURTOTAL of Receipts This Page (ontional	l)	1075.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 37 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Italian American Political Actions	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Chet Beiler Mailing Address 340 Hostetter Rd  City Manheim  FEC ID number of contributing federal political committee.  Name of Employer Amish Country Gazebos  Receipt For: Primary General Other (specify)	State PA C Occupatio CEO Aggregate	Zip Code 17545 n e Year-to-Date ▼	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Salvatore Berardi Mailing Address 2868 Angus Rd  City Philadelphia  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary Other (specify)	State PA C Occupatio Retired Aggregate	Zip Code 19114 nn e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) GABRIEL BEVILACQUA Mailing Address 1000 SUSAN RD.  City PHILADELPHIA FEC ID number of contributing federal political committee.  Name of Employer SAUL EWING, LLP  Receipt For: Primary General Other (specify)	State PA C Occupation ATTORN Aggregate		Date of Receipt  M M J D D Z 2008  Transaction ID: SA11Al.8199  Amount of Each Receipt this Period  300.00
SUBTOTAL of Receipts This Page (optional)			900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8/37 (check only one)    X		
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Royal Brown Mailing Address 1429 E. 15th Stree	ıt	Date of Receipt		
City Philadelphia	State Zip Code PA 19146	Transaction ID: SA11AI.8214  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.  Name of Employer Greater Phila Health Action	Occupation Chairperson	350.00		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) Royal Brown Mailing Address 1429 E. 15th Stree	et .	Date of Receipt  1 0 2 3 2 0 0 8		
City	•			
Philadelphia  FEC ID number of contributing federal political committee.	PA 19146	Amount of Each Receipt this Period  30.00		
Name of Employer Greater Phila Health Acti- on Receipt For:	Occupation Chairperson  Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	380.00			
Full Name (Last, First, Middle Initial) Raymond Bucceroni Mailing Address 2020 Walnut Stree	t Apt 21E	Date of Receipt		
	10 23 2008			
City Philadelphia	State Zip Code PA 19103	Transaction ID: SA11AI.8230  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	300.00		
Name of Employer Raymond S. Bucceroni Real Estate Receipt For:	Occupation Realtor  Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	300.00			
SUBTOTAL of Receipts This Page (option	al)	680.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 37 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Italian American Political Act	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Judith Camiel  Mailing Address 624 Hazelhurst Rd		Date of Receipt  1 0 2 3 2 0 0 8
City  Merion Station  FEC ID number of contributing	State Zip Code PA 19066	Transaction ID: SA11AI.8237  Amount of Each Receipt this Period  350.00
rederal political committee.  Name of Employer The Camiel Group, LLC  Receipt For:  Primary  General  Other (specify) ▼	Occupation Fundraiser  Aggregate Year-to-Date   350.00	]
Full Name (Last, First, Middle Initial) Judith Camiel Mailing Address 624 Hazelhurst Rd		Date of Receipt  1 0 2 3 2 0 0 8
City  Merion Station  FEC ID number of contributing federal political committee.	State Zip Code PA 19066  C	Transaction ID: SA11AI.8238  Amount of Each Receipt this Period  350.00
Name of Employer The Camiel Group, LLC  Receipt For:  Primary General  Other (specify) ▼	Occupation Fundraiser  Aggregate Year-to-Date  700.00	
Full Name (Last, First, Middle Initial) Barbara Capozzi Mailing Address 100 Turnbridge Circle		Date of Receipt
City Haverford  FEC ID number of contributing federal political committee.	State Zip Code PA 19083	Transaction ID: SA11AI.8203  Amount of Each Receipt this Period  1050.00
Name of Employer Capozzi Real Estate  Receipt For: Primary General	Occupation Real Estate/ Insurance Aggregate Year-to-Date	
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	2175.00	1750.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Barbara Capozzi Mailing Address 100 Turnbridge C  City Haverford  FEC ID number of contributing federal political committee.  Name of Employer Capozzi Real Estate  Receipt For:	State Zip Code PA 19083  C  Occupation Real Estate/ Insurance Aggregate Year-to-Date ▼	Date of Receipt    M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Aaron J. Cohen  Mailing Address 1515 Market St, \$	2575.00 Ste 1540	Date of Receipt  1 0 2 3 2 0 0 8
City Philadelphia  FEC ID number of contributing federal political committee.  Name of Employer Avenue Strategies  Receipt For:	State Zip Code PA 19102  C  Occupation Consultant  Aggregate Year-to-Date	Transaction ID: SA11AI.8235  Amount of Each Receipt this Period  350.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) SANDRO CORRADO  Mailing Address 2110 KEYSTONE	350.00	Date of Receipt
City HATFIELD FEC ID number of contributing federal political committee.	State Zip Code PA 19440  C	Transaction ID: SA11AI.8241  Amount of Each Receipt this Period  2250.00
Name of Employer CORRADO & SONS  Receipt For:  Primary General Other (specify) ▼	Occupation EXECUTIVE  Aggregate Year-to-Date ▼  2250.00	
SUBTOTAL of Receipts This Page (optic	nal)	3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 11 / 37 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)  National Italian American Politica	ng the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SANDRO CORRADO		Date of Receipt
Mailing Address 2110 KEYSTONE	DRIVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.8256
HATFIELD	PA 19440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer CORRADO & SONS	Occupation EXECUTIVE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Melinda De Nofa	I	Date of Receipt
Mailing Address 3816 Loop Rd.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.8249
Huntingdon Valley	PA 19006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer Molly Construction	Occupation Business	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Francesco Di Cianni	I	Date of Receipt
Mailing Address 2201 Galloway Ro	3	10 23 2008
City	State Zip Code	Transaction ID: SA11AI.8228
Bensalem	PA 19020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Celebrations	Occupation Business Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SURTOTAL of Receipts This Page (option	nal)	2500.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting control of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such con NAME OF COMMITTEE (in Full)  National Italian American Political Action Committee  Full Name (Last, First, Middle Initial)  Jeannine Jewell  Mailing Address 1100 Bailey Dr.  City  State Zip Code  Phoenixville  PA 19460  FEC ID number of contributing federal political committee.  Name of Employer  Chase Payments  Receipt For:  Primary General  Other (specify) ▼  State Zip Code  Primary General  Other (specify) ▼  State Zip Code  PA 19086  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  FEC ID number of contributing federal political committee.  City  State Zip Code  PA 19086  Date of Receipt  To b 1 7	e schedule(s) egory of the (check only on	Use separate sched for each category on Detailed Summary	EDULE A (FEC Form 3X)  MIZED RECEIPTS	
Full Name (Last, First, Middle Initial)  Jeannine Jewell  Mailing Address 1100 Bailey Dr.  City State Zip Code PA 19460  FEC ID number of contributing federal political committee.  Name of Employer Chase Payments  Full Name (Last, First, Middle Initial)  Frances Kelly  Mailing Address 735 Canterbury Lane  City State Zip Code PA 19086  Full Name (Last, First, Middle Initial)  Frances Kelly  Mailing Address 735 Canterbury Lane  City State Zip Code PA 19086  FEC ID number of contributing federal political committee.  Name of Employer Canterbury Consultants, Inc. Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11A1.8  Amount of Each Receipt this  PEC ID number of contributing federal political committee.  Name of Employer  SELF-EMPLOYED  Aggregate Year-to-Date ▼  Occupation  ATTORNEY  Receipt For: Primary General  Aggregate Year-to-Date ▼  PA 19083			ME OF COMMITTEE (In Full)	
Phoenixville PA 19460  FEC ID number of contributing federal political committee.  Name of Employer Chase Payments  Receipt For:    Primary   General     Other (specify) ▼     Occupation     Executive     Aggregate Year-to-Date ▼     1 0	M M /		l Name (Last, First, Middle Initial) annine Jewell	M M / D D / Y Y Y Y
State   Zip Code		PA 19460	oenixville	Transaction ID: SA11AI.8227  Amount of Each Receipt this Period
Other (specify) ▼    State   State	<u> </u>	Occupation Executive	eral political committee.  me of Employer ase Payments	350.00
Mailing Address 735 Canterbury Lane  City State Zip Code Villanova PA 19086  FEC ID number of contributing federal political committee.  Name of Employer Canterbury Consultants, Inc. Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) VINCENT MANCINI  Mailing Address 414 E. BALTIMORE PIKE  City State Zip Code MEDIA PA 19063  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Name of Employer Self-FeMPLOYED  Receipt For: Primary General Occupation ATTORNEY  Aggregate Year-to-Date ▼  1 0 1 7 7  Transaction ID: SA11AI.8  Amount of Each Receipt this  Transaction ID: SA11AI.8  Amount of Each Receipt this		35	Other (specify) ▼  I Name (Last, First, Middle Initial)	Date of Receipt
Villanova PA 19086   FEC ID number of contributing federal political committee. C    Amount of Each Receipt this  C   Name of Employer Canterbury Consultants, Inc. Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Pall Name (Last, First, Middle Initial) VINCENT MANCINI  Mailing Address 414 E. BALTIMORE PIKE  City State Zip Code MEDIA PA 19063  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For: Primary General  Aggregate Year-to-Date ▼  Primary General  Amount of Each Receipt this  Amount of Each	M M /		M M / D D / Y Y Y Y	
FEC ID number of contributing federal political committee.    Name of Employer Canterbury Consultants, Inc.   Broker		•	Transaction ID: SA11AI.8198	
Inc. Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) VINCENT MANCINI Mailing Address 414 E. BALTIMORE PIKE  City State Zip Code MEDIA PA 19063  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For: Primary General  Aggregate Year-to-Date ▼  Occupation ATTORNEY  Aggregate Year-to-Date ▼  Primary General	Amount of		C ID number of contributing	Amount of Each Receipt this Period 350.00
Primary General Other (specify) ▼ 350.00  Full Name (Last, First, Middle Initial) VINCENT MANCINI  Mailing Address 414 E. BALTIMORE PIKE  City State Zip Code MEDIA PA 19063  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For: Aggregate Year-to-Date ▼  Primary General 350.00		Broker		
VINCENT MANCINI  Mailing Address 414 E. BALTIMORE PIKE  City State Zip Code  MEDIA PA 19063  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For:  Primary General  Date of Receipt  Transaction ID: SA11AI.82  Amount of Each Receipt this	1 1 1 1		Primary General	
MEDIA  PA 19063  Amount of Each Receipt this  FEC ID number of contributing federal political committee.  C  Name of Employer SELF-EMPLOYED  Receipt For:  Primary  General  Amount of Each Receipt this  Amount of Each Receipt this	M ' M /	(E	ICENT MANCINI	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED  Receipt For:  Primary General  C  Occupation ATTORNEY  Aggregate Year-to-Date ▼	Transactio	·		Transaction ID: SA11Al.8211
Receipt For:  Primary  General  ATTORNEY  Aggregate Year-to-Date  Q00,00	Amount of		C ID number of contributing	Amount of Each Receipt this Period 900.00
Primary General		'		
	1 1 1 1		Primary General	
SUBTOTAL of Receipts This Page (optional)			OTAL of Receipts This Page (optional)	1600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 37 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political	nd Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) VINCENT MANCINI Mailing Address 414 E. BALTIMORI City MEDIA FEC ID number of contributing federal political committee.		Date of Receipt    M M
Name of Employer SELF-EMPLOYED  Receipt For:  Primary General  Other (specify) ▼	ATTORNEY  Aggregate Year-to-Date ▼  1200.00	
Full Name (Last, First, Middle Initial) Donna Massanova  Mailing Address 2 Penn Ctr Plaza		Date of Receipt  10 20 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City	State Zip Code	Transaction ID: SA11AI.8148
<u>Philadelphia</u>	PA 19102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Parente Randolph, LLC	Occupation CPA	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  375.00	
Full Name (Last, First, Middle Initial) Donna Massanova	L	Date of Receipt
Mailing Address 2 Penn Ctr Plaza		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11Al.8232
Philadelphia  FEC ID number of contributing federal political committee.	PA 19102	Amount of Each Receipt this Period  350.00
Name of Employer Parente Randolph, LLC	Occupation CPA	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  725.00	
SUBTOTAL of Receipts This Page (optional	(lg	775.00

ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14/3/ (check only one)     X   11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Italian American Political	Action Committ	ee	
Full Name (Last, First, Middle Initial) EMILIO MATTICOLI			Date of Receipt
Mailing Address 3223 S SMEDLEY	STREET		10 23 2008
City PHILADELPHIA	State PA	Zip Code 19145	Transaction ID: SA11AI.8219  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10110	500.00
Name of Employer FOUNDATIONS INC	Occupation CHIEF O	n PF STAFF	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) James McGrath			Date of Receipt
Mailing Address 16 North Centre Street			10 23 Y Y Y Y Y Y
City	State NJ	Zip Code	Transaction ID: SA11AI.8270
Merchantsville  FEC ID number of contributing federal political committee.	C	08109	Amount of Each Receipt this Period 500.00
Name of Employer PRD Management	Occupation Executive		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Robert A. Messa			Date of Receipt
Mailing Address 1814 Overlook Roa	ad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Feasterville	State PA	Zip Code 19053	Transaction ID: SA11AI.8216  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	375.00
Name of Employer	Occupation Retired	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
			1375.00

# SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 37 (check only one)    X
\	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Italian American Political Act	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		<del></del>	But (Busin
۱.	Jayme Morano Mailing Address 508 E. Lackawanna A	ve.		Date of Receipt  10
	City Olyphant	State PA	Zip Code 18447	Transaction ID: SA11AI.8180  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Lackawanna County Government Receipt For:  Primary General Other (specify) ▼		of Buildings & Grounds e Year-to-Date ▼ 325.00	
3.	Full Name (Last, First, Middle Initial) Sandra Palermo  Mailing Address 1443 Revelation Rd.	I		Date of Receipt
	City	State	Zip Code	1 0 1 7 2 0 0 8 Transaction ID: SA11AI.8194
	Meadowbrook	PA	19046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Muller Inc.	Occupation Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
. –	Full Name (Last, First, Middle Initial) Sandra Palermo			Date of Receipt
-	Mailing Address 1443 Revelation Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.8196
	Meadowbrook  FEC ID number of contributing federal political committee.	C	19046	Amount of Each Receipt this Period 1925.00
	Name of Employer Muller Inc.	Occupation Presiden		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 2675.00	
	SUBTOTAL of Receipts This Page (optional)			2800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16 17					
,	Any information copied from such Reports and or for commercial purposes, other than using th	on for the purpose of soliciting contributions o solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)  National Italian American Political Ac	tion Committ	tee						
Α.	Full Name (Last, First, Middle Initial) Joseph F. Pandolfi			Date of Receipt					
	Mailing Address 1824 S. BROAD STR	EET		10 23 7 2008					
	City PHILADELPHIA	State PA	Zip Code 19145	Transaction ID: SA11AI.8210					
	FEC ID number of contributing federal political committee.	C	19145	Amount of Each Receipt this Period  225.00					
	Name of Employer SELF	Occupation PHYSIC							
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00						
В.	Full Name (Last, First, Middle Initial) Nancy Paolino Mailing Address 650 Robert Road	Date of Receipt							
	walling Address 650 Robert Road			10 30 7 2008					
	City Bryn Mawr	State PA	Zip Code	Transaction ID: SA11AI.8255					
	FEC ID number of contributing federal political committee.	C	19010	Amount of Each Receipt this Period					
	Name of Employer	Occupation Homema							
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00						
_ С.	Full Name (Last, First, Middle Initial) RAYMOND A. PESCATORE			Date of Receipt					
	Mailing Address 116 RENAISSANCE I	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City CHERRY HILL	State NJ	Zip Code 08033	Transaction ID: SA11AI.8268  Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		350.00					
	Name of Employer CATCH PEOPLE CARE	Occupatio CEO	on						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1750.00						
	SUBTOTAL of Receipts This Page (optional) .	1		1575.00					
	TOTAL This Period (last page this line numbe	r only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 37 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Italian American Political Advanced in the National Italian American Political Italian American Political Advanced in the National Italian American Political Italian Ital			
Full Name (Last, First, Middle Initial) Joann Russo Mailing Address 1762 Teresa Court  City Downingtown  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For: Primary General	State PA C Occupation RN	Zip Code 19335 n	Date of Receipt  M M M
Other (specify) ▼  Full Name (Last, First, Middle Initial) Joann Russo Mailing Address 1762 Teresa Court  City  Downingtown  FEC ID number of contributing federal political committee.	State PA	Zip Code 19335	Date of Receipt  M M M / D D / 2 3
Name of Employer Self Employed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Joann Russo  Mailing Address 1762 Teresa Court	Occupation RN Aggregate	e Year-to-Date ▼ 975.00	Date of Receipt
City  Downingtown  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary  General  Other (specify)	State PA  C  Occupation RN  Aggregate	Zip Code 19335 n • Year-to-Date ▼	Transaction ID: SA11AI.8244  Amount of Each Receipt this Period  400.00
SUBTOTAL of Receipts This Page (optional)			1100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16				
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political	nd Statements may not be sold or used by any pers the name and address of any political committee t					
Full Name (Last, First, Middle Initial)	Action Committee	Date of Descipt				
Roger Sanchez  Mailing Address 239 Dudley Ave		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Narberth	State Zip Code PA 19072	Transaction ID: SA11AI.8246  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	350.00				
Name of Employer Neuberger Berman	Occupation Financial Services					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
Full Name (Last, First, Middle Initial) Louis D. Scarcia	Date of Receipt					
Mailing Address 12013 Depue St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: SA11AI.8208				
<u>Philadelphia</u>	PA 19116	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	350.00				
Name of Employer V.H. Pasquerella Company	Occupation R.E. Agent					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	350.00					
Full Name (Last, First, Middle Initial) Jennifer Schalleur	- 1	Date of Receipt				
Mailing Address 201 Summerwind I	_ane	10 23 2008				
City	State Zip Code	Transaction ID: SA11AI.8242				
Harleysville FEC ID number of contributing federal political committee.	PA 19438	Amount of Each Receipt this Period 350.00				
Name of Employer Christo Consulting, LLC	Occupation IT Consulting					
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00					
SUBTOTAL of Receipts This Page (option)	l)l)	1050.00				

# SCHEDULE A (FEC Form 3X)

CHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and for commercial purposes, other than using NAME OF COMMITTEE (In Full)  National Italian American Political A	d Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)		
Andrew J. Scutti		Date of Receipt
Mailing Address 1348 Arthur Rd.		10 21 2008
City	State Zip Code	Transaction ID: SA11AI.8147
Maple Glen	PA 19002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Dale Corporation	Occupation Director Safety & Health	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Andrew J. Scutti	Date of Receipt	
Mailing Address 1348 Arthur Rd.		10 23 YYYYY 2008
City	State Zip Code	Transaction ID: SA11AI.8206
Maple Glen	PA 19002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1050.00
Name of Employer Dale Corporation	Occupation Director Safety & Health	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1425.00	
Full Name (Last, First, Middle Initial) Mark Spadaccino		Date of Receipt
Mailing Address 98 Cheese Factory I	Road	10 30 2008
City	State Zip Code	Transaction ID: SA11AI.8259
Doylestown	PA 18901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3700.00
Name of Employer Dale Construction	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	3700.00	
SUBTOTAL of Receipts This Page (optional		5000.00

FOR LINE NUMBER: PAGE 20/37 **SCHEDULE A (FEC Form 3X)** Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Italian American Political Action Committee Full Name (Last, First, Middle Initial) VINCENT TURCO Date of Receipt Mailing Address 3544 W. CROWN AVE 10 23 2008 City State Zip Code Transaction ID: SA11AI.8271 **PHILADELPHIA** PA 19114 Amount of Each Receipt this Period FEC ID number of contributing C 350.00 federal political committee. Name of Employer Occupation Retired Receipt For: Aggregate Year-to-Date Primary General 350.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	350.00
TOTAL This Period (last page this line number only)	<b>•</b>	25530.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 37 (check only one)  11a 11b X 11c 12  13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an	s may not be sold or used by any perso d address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Italian American Political Action Com	mittee	
Full Name (Last, First, Middle Initial) Committee to Elect Mayor Joseph DiGirolamo Mailing Address 3982 Grace Ave.  City Stat	re Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Bensalem PA  FEC ID number of contributing federal political committee.  Name of Employer Bensalem Township  Occur	19020 pation	Amount of Each Receipt this Period  2250.00
Receipt For:  Primary  General  Other (specify) ▼	egate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	2250.00
TOTAL This Period (last page this line number only)	<b>•</b>	2250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 37 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name a	nts may not be sold or used by any perso and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Italian American Political Action Co	mmittee	
Full Name (Last, First, Middle Initial) UTA ASSOCIATES  Mailing Address 1205 LOCUST ST SUITE 100  City SI PHILADELPHIA P	tate Zip Code A 19107	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer  Occ	cupation	Void Check
Receipt For:  Primary  General  Other (specify) ▼	gregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1250.00
TOTAL This Period (last page this line number only)	<u> </u>	1250.00

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 23 / 37									
	EMIZED RECEIPTS		for each category of the	(check only one)									
			Detailed Guillinary Fage	13 14 15 16 X 17									
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
$\rangle$	National Italian American Political Action 0	Reports and Statements may not be sold or used by a nan using the name and address of any political complete of the name and address of any politi	ee										
	Full Name (Last, First, Middle Initial) NATIONAL ITALIAN AMERICAN FOUNDATION			Date of Receipt									
	Mailing Address 1860 19TH STREET N.W.	•		11 24 2008									
	City	State	Zip Code	Transaction ID: SA17.8309									
	WASHINGTON	DC	20009	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		3800.00									
				Void Contribution Check									
	Name of Employer	Occupation	1	never cashed									
		Aggregate	Year-to-Date ▼										
	Primary General Other (specify)		3800.00										

SUBTOTAL of Receipts This Page (optional)	•	3800.00
TOTAL This Period (last page this line number only)	<u> </u>	3800.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate se		FOR LINE				R:		PAGE 24/37						
ITEMIZED DISBURSEMENTS	for each catego Detailed Summ		1-	21b 27	F	22 28a	$\vdash$	23 28b	24	4 [ 3c	25				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name															
NAME OF COMMITTEE (In Full)  National Italian American Political Action C	Committee														
Full Name (Last, First, Middle Initial) Anderson Delone  Mailing Address 370 W. Johnson St, D3						Date		sburs	: SB2 ement	21B.	8274 Ž 0				
	State Zip C					Amou	int of	Each	Disbu	rsem		is Period			
Purpose of Disbursement PAC Fundraising Event Costs Candidate Name				egory/ ype		L.		•			900	.00			
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General		<u> </u>											
Full Name (Last, First, Middle Initial) JOSEPH A. AUTERI  Mailing Address 2515 GARRETT ROAD						Date		sburs	: SB2 ement	21B.		Ď8°			
•	State Zip (					Amou	ınt of	Each	Disbu	rsem	ent th	is Period			
Purpose of Disbursement Office Supplies Reimbursement Candidate Name	170			egory/				<u>.                                    </u>		•	240	.00			
Office Sought:  Senate President  State:  Disburse	ment For: Primary Other (specify)	General													
Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK						Date of	of Di	sburs	: SB2	21B.					
Mailing Address 165 POTTSTOWN PIKE						1 <sup>M</sup> 0	M /	<sup>D</sup> 1	7	Y	ž 0	Ď8 <sup>°</sup>			
CHESTER SPRINGS	State Zip 0 PA 194					Amou	int of	Each	Disbu	rsem		is Period			
Purpose of Disbursement Merchant Credit Card Fees Candidate Name				egory/							379	.97			
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General	- 1	ype											
State: District:	Curer (specify)	<b>-</b>													
SUBTOTAL of Disbursements This Page (optional) .				▶							1519	.97			

C.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
National Italian American Political Action	Committee		
Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK			Transaction ID: SB21B.8278 Date of Disbursement
Mailing Address 165 POTTSTOWN PIKE			10 M / D 3 D / Y 2 0 0 8 Y
City CHESTER SPRINGS	State Zip Code PA 19425		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fees		0 0	613.43
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK			Transaction ID: SB21B.8279 Date of Disbursement
Mailing Address 165 POTTSTOWN PIKE	<u> </u>		$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & D \\ 1 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
City CHESTER SPRINGS	State Zip Code PA 19425		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Credit Card Fees			711.50
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
CHRISTO CONSULTING			Transaction ID: SB21B.8150 Date of Disbursement
Mailing Address 292 Main St. Suite 331			$ \begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \begin{bmatrix} D & D & D \\ 1 & 6 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
City Harleysville	State Zip Code PA 19438		Amount of Each Disbursement this Period
Purpose of Disbursement Website Design & Maintenance			156.25
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify)	715 -	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1481.18

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b									
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person for	or the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)	e and address of any pointical	Committee to son	icit contributions from Such committee									
National Italian American Political Action (	Committee											
Full Name (Last, First, Middle Initial) CHRISTO CONSULTING		Transaction ID: SB21B.8283 Date of Disbursement										
Mailing Address 292 Main St. Suite 331			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & D \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & O & O & S \end{bmatrix}^{Y}$									
City Harleysville	State Zip Code PA 19438		Amount of Each Disbursement this Period									
Purpose of Disbursement Website Design & Maintenance Costs			125.00									
Candidate Name		Category/ Type										
Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) CONCENTRIC SERVICES			Transaction ID: SB21B.8165 Date of Disbursement									
Mailing Address 55 ALMADEN BLVD, 7T	H FLOOR		$\begin{bmatrix} 1 & 1 & M & M & M & M & M & M & M & M &$									
City SAN JOSE	State Zip Code CA 95113		Amount of Each Disbursement this Period									
Purpose of Disbursement Website Maintenance Costs			19.95									
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) CONESTOGA BANK			<b>Transaction ID:</b> SB21B.8151 Date of Disbursement									
Mailing Address 165 POTTSTOWN PIKE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 1 & 0 \\ 0 & 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix} $									
City CHESTER SPRINGS	State Zip Code PA 19425		Amount of Each Disbursement this Period									
Purpose of Disbursement Merchant Credit Card Fees			50.26									
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:	- ·											
SURTOTAL of Dishursements This Page (optional)			195.21									

В.

C.

### **SCHEDULE B (FEC Form 3X)** ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 27/37 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) National Italian American Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: SB21B.8285 CONESTOGA BANK Date of Disbursement 2 2 1<sup>™</sup>0 2008 Mailing Address 165 POTTSTOWN PIKE City State Zip Code Amount of Each Disbursement this Period CHESTER SPRINGS PA 19425 135.00 Purpose of Disbursement Bank Service Charges Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.8173 **CONESTOGA BANK** Date of Disbursement 1<sup>™</sup>0 2 3 2008 Mailing Address 165 POTTSTOWN PIKE City State Zip Code Amount of Each Disbursement this Period CHESTER SPRINGS 19425 PA 134.95 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.8286 CONESTOGA BANK Date of Disbursement 2 8ั 2008 Mailing Address 165 POTTSTOWN PIKE City State Zip Code Amount of Each Disbursement this Period CHESTER SPRINGS PA 19425 34.95 Purpose of Disbursement Merchant Credit Card Fees Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 304.90 SUBTOTAL of Disbursements This Page (optional) ...  $\blacktriangleright$ 

TOTAL This Period (last page this line number only) .....

C.

SCHEDULE B (FEC Form 3X)		ate schedule(s)			OR LIN			R:		PAGE				37					
ITEMIZED DISBURSEMENTS		tegory of the ımmary Page		X	_		22 28a		23 28b	F	24 28c		25 29	$\vdash$	26 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														5					
NAME OF COMMITTEE (In Full)  National Italian American Political Action C	ommittee																		
Full Name (Last, First, Middle Initial) CONESTOGA BANK						Transaction ID: SB21B.8162 Date of Disbursement  1 1 0 0 3 7 7 7 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7													
Mailing Address 165 POTTSTOWN PIKE																			
,		Zip Code 19425				Amount of Each Disbursement this Period													
Purpose of Disbursement Merchant Credit Card Fees				0		25.00													
Candidate Name					gory/ pe														
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specif	General <b>▼</b>																	
Full Name (Last, First, Middle Initial) CONESTOGA BANK							Trans Date o	of D	sburs	em	nent	_							
Mailing Address 165 POTTSTOWN PIKE						111 DO 4 Y Y Y O 0 8													
		Zip Code 19425					Amou	nt o	Each	ı D	isburse	emen	t this I	Period	_				
Purpose of Disbursement Merchant Credit Card Fees								_	_				125.6	2					
Candidate Name					gory/ pe														
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specif	General <b>▼</b>			-														
Full Name (Last, First, Middle Initial)							Trans					B.81	66						
CONESTOGA BANK  Mailing Address 165 POTTSTOWN PIKE							Date of	of Di		err 1 C		Ž	0 0 8	3 Y					
	State 2	Zip Code				+	Amou	nt o	Each	ı D	isburse	emer	t this I	Period					
CHESTER SPRINGS		19425											34.9	5					
Purpose of Disbursement Merchant Credit Card Fees										-	-		01.0						
Candidate Name					gory/ pe														
Office Sought: House Disburse Senate President	ment For: Primary Other (speci	General <b>T</b>																	
State: District:	( )	-· •																	
SUBTOTAL of Disbursements This Page (optional) .									•			1	85.5 <sup>-</sup>	7					

C.

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)				JMBER:		P	AGE	29 / 3	37	
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	ا ا	(check c X 21b 27	<u> </u>	22 28a	23 28b	24 28c		25 29		26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				ny perso		the purp	ose of s	oliciting c		outions	3	
NAME OF COMMITTEE (In Full)  National Italian American Political Action C	Committee	,										
Full Name (Last, First, Middle Initial) CONESTOGA BANK						Transac Date of	Disburs	: SB21 ement	v v	68 0 0 8	Y	
Mailing Address 165 POTTSTOWN PIKE												
,	State PA	Zip Code 19425				Amount	of Each	Disburse	emen		_	d
Purpose of Disbursement Merchant Credit Card Fees				•					_	34.9	5	_
Candidate Name				egory/ ype								
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>								
Full Name (Last, First, Middle Initial) DAVE PASCAL						Date of	Disburs	: SB21 ement	B.82	287		
Mailing Address 7 MADISON DR.						1 0 M	/ D2	22 /	Ý Ž	0 0 8	3 Y	
,	State PA	Zip Code 19090				Amount	of Each	Disburse	emen	t this f	Perio	nd .
Purpose of Disbursement PAC Fundraising Event Costs-Entertainment									3	340.0	0	
Candidate Name				egory/ ype								
Senate President	ment For: Primary Other (spe	General ecify) ▼										
State: District:  Full Name (Last, First, Middle Initial)  LA BUCA RESTAURANT						Transac Date of		: SB21	B.82	291		
Mailing Address 711 LOCUST STREET						1 0 M		2 2 /	Ý Ž	0 0 8	3 Y	
	State PA	Zip Code 19106				Amount	of Each	Disburse	emen	t this f	Peric	nd
Purpose of Disbursement Catering Costs	1 A	13100							57	720.0	0	
Candidate Name				egory/ ype								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General	<u>'</u>	, <sub>P</sub> ~								
State: District:		<i>y,</i> <b>∀</b>										
SUBTOTAL of Disbursements This Page (optional) .				<b>&gt;</b>	•				60	94.9	5	

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 30/37				
TEMIZED DISBURSEMENTS	for each category of the	(check only	one)   22	24 25 26				
	Detailed Summary Page	X 210   -	$\begin{array}{c c} -22 \\ 28a \end{array} \begin{array}{c} 23 \\ 28b \end{array} \begin{array}{c} -1 \\ 28b \end{array}$	28c   29   30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
National Italian American Political Action C	committee							
Full Name (Last, First, Middle Initial) LA COLLINA			Transaction ID: S Date of Disbursemen					
Mailing Address 37-41 ASHLAND AVE.			10 20	2008				
,	State Zip Code PA 19004		Amount of Each Disl	bursement this Period				
Purpose of Disbursement Meeting Expenses				272.00				
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) LA COLLINA			Transaction ID: S Date of Disbursemen	nt				
Mailing Address 37-41 ASHLAND AVE.			111 DOS / Y YOY8					
,	State Zip Code PA 19004		Amount of Each Dis	bursement this Period				
Purpose of Disbursement Meeting Expenses				787.20				
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) MIKE MOUNTAIN PHOTOGRAPHY			Transaction ID: S Date of Disbursemen	nt				
Mailing Address 737 N. EASTON RD.			10 23	2008				
	State Zip Code PA 19038		Amount of Each Disl	bursement this Period				
Purpose of Disbursement PAC Fundraising Event Costs				339.00				
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	76-2						
State: District:	- (-I)/ <b>V</b>							
SUBTOTAL of Disbursements This Page (optional) .				1398.20				

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 31/37											
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)											
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b											
Any Information copied from such Reports and Staten														
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any political	committee to sol	icit contributions from such committee											
National Italian American Political Action (	Committee													
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.8296											
Radnor Restaurant			Date of Disbursement											
Mailing Address 591 E Lancaster Ave			10 M / D D / Y 2 0 0 8 Y											
City St Davids	State Zip Code PA 19087		Amount of Each Disbursement this Period											
Purpose of Disbursement	13007	-	236.76											
Meals Candidate Name		Cotogony												
Candidate Name		Category/ Type												
Office Sought: House Disburse Senate	ement For:  Primary General													
President	Other (specify)													
State: District:														
Full Name (Last, First, Middle Initial) Ruth Cris Steak House			Transaction ID: SB21B.8171 Date of Disbursement											
Mailing Address 260 S Broad Street			10 28 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
Mailing Address 260 S Broad Street														
City Philadelphia	State Zip Code PA 19102		Amount of Each Disbursement this Period											
Purpose of Disbursement			427.37											
Meeting Expenses Candidate Name		Category/												
		Type												
Office Sought: House Disburse Senate	ement For:  Primary General													
President	Other (specify)													
State: District: Full Name (Last, First, Middle Initial)			Turney Mary ID CD04D 0000											
Anthony Sandor			<b>Transaction ID:</b> SB21B.8306  Date of Disbursement											
Mailing Address 7 Madison Rd			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & O \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & 8 \end{bmatrix}$											
City Willow Grove	State Zip Code PA 19090		Amount of Each Disbursement this Period											
Purpose of Disbursement			340.00											
PAC Fundraising Event Costs-Entertainment Candidate Name		Category/												
		Type												
Office Sought: House Disburse Senate	ement For:  Primary General													
President	Other (specify)													
State: District:														
SUBTOTAL of Disbursements This Page (optional)			1004.13											

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LIN		UMBE	R:			PA	GE	32 / 3	37	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b 27	A	22 28a		23 28b	24		П	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name					the pu			oliciting	COI			<del></del>	
NAME OF COMMITTEE (In Full)  National Italian American Political Action (	Committee												
Full Name (Last, First, Middle Initial) The Public Record					Trans		isburse	ement	21B			V	
Mailing Address 1330 Ritner St					1 0		<sup>/</sup> 2	1 1	L	2	οŏε	3	
City Philadelphia	State Zip Code PA 19148				Amou	nt o	f Each	Disbu	sen			-	d
Purpose of Disbursement PAC Advertising			·							. 1	90.00	)	
Candidate Name		teç Typ	jory/ e										
Senate President	ement For: Primary General Other (specify)												
State: District: Full Name (Last, First, Middle Initial)					Trans	acti	on ID:	SB2	 21B	.83	00		
USPS					Date o		isburse	ement	Y			Υ	
Mailing Address					1 0		2	1 /	L	2	οŏε	3	
City Bala Cynwyd	State Zip Code PA 19004				Amou	nt o	f Each	Disbu	sen	nen	t this F	Perio	d
Purpose of Disbursement Postage		•			<u></u>	0				. 2	71.32	2	
Candidate Name		iteç Typ	jory/ e										
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial) UTA ASSOCIATES					Trans				21B	.83	01		
Mailing Address 1205 LOCUST ST SUITE 100					1 0	М	<sup>/</sup> 1	<sup>D</sup> 7	Y	ž	o ŏ e	3 Y	
	State Zip Code PA 19107				Amou	nt o	f Each	Disbu	sen	-		-	d
Purpose of Disbursement Compensation for PAC Fundraising Svcs						0				14	16.06	3	
Candidate Name		teç Typ	jory/ e										
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)												
State: District:	- ·												
SUBTOTAL of Disbursements This Page (optional)		 	<b>•</b>							18	77.38	3	

В.

# SCHEDULE B (FEC Form 3X)

Senate

District:

President

FOR LINE NUMBER: PAGE 33/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) National Italian American Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: SB21B.8302 **UTA ASSOCIATES** Date of Disbursement 3 Ŏ 1<sup>™</sup>0 2008 Mailing Address 1205 LOCUST ST SUITE 100 City State Zip Code Amount of Each Disbursement this Period **PHILADELPHIA** PA 19107 2027.13 Purpose of Disbursement Compensation for PAC Fundraising Svcs Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.8167 **UTA ASSOCIATES** Date of Disbursement 19 2008 Mailing Address 1205 LOCUST ST SUITE 100 City State Zip Code Amount of Each Disbursement this Period **PHILADELPHIA** 19107 PA 1250.00 Purpose of Disbursement Compensation for PAC Fundraising Svcs Candidate Name Category/ Type Office Sought: House Disbursement For:

General

SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	3277.13
TOTAL This Period (last page this line number only)		17338.62

Primary

Other (specify)

State:

_	ALIEDIU E DI/EEO E AVA											
5(	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		LINE NUMBER: PAGE 34/3								
IT	EMIZED DISBURSEMENTS	for each category of the	(check onl	<u> </u>								
•		Detailed Summary Page	21b		24 25 26							
_	<del></del>		27	X 28a 28b	28c 29 30b							
	y Information copied from such Reports and State for commercial purposes, other than using the na				o .							
OI I		The and address of any political co	minilitiee to sc	MICIE CONTINUEDULIONS TROITI S	den committee							
\	NAME OF COMMITTEE (In Full)											
/	National Italian American Political Action	Committee										
	Full Name (Last, First, Middle Initial)			Transaction ID: S	B28A.8308							
	Tami L. Fratis			Date of Disbursemer								
				10 D D D	2008							
	Mailing Address 6435 Overbrook Ave			10 21	2008							
	City	State Zip Code		Amount of Each Disk	oursement this Period							
	Philadelphia	PA 19151-2414										
	Purpose of Disbursement				3300.00							
	Refund Contribution											
	Candidate Name		Category/									
			Туре									
	Office Sought: House Disbur	sement For:										
	Senate	Primary General										
	President	Other (specify) ▼										
	State: District:											

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	3300.00
TOTAL This Period (last page this line number only)	<u> </u>	3300.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	ete schedule(s) FOR LINE NUMBER						R: PAGE 35/37							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	´  ,	<u> </u>	k only 1b	one) 22 28a		23 28b	F	24 28c	X	25 29	26			
Any Information copied from such Reports and State												<u> </u>			
or for commercial purposes, other than using the nar  NAME OF COMMITTEE (In Full)	ne and address of any political	aı comi	mittee	to soli	cit conti	ibut	ions i	ror	n sucn	comr	nittee				
National Italian American Political Action	Committee														
Full Name (Last, First, Middle Initial)  CATCH People Care					Date	of D	isbur	ser		.815	5				
Mailing Address 1409 Lombard Street					1 <sup>M</sup> 0	М	/ D	1	6 /	Ý Ž	0 0 8	3 Y			
City Philadelphia	State Zip Code PA 19146				Amou	int o	f Eac	h [	Disburs	-					
Purpose of Disbursement Charitable Contribution						-	_		-	5	500.0	0			
Candidate Name		1	itegory Type	//											
Office Sought: House Disburs Senate President	sement For:  Primary General  Other (specify) ▼	•													
State: District:															
Full Name (Last, First, Middle Initial) Farnese for State Senate				Transaction ID: SB29 Date of Disbursement							7				
Mailing Address 1420 Locust Street					1 <sup>M</sup> 0	М	/ D	2	D /	Ý Ž	0 0 8	3 Y			
City Philadelphia	State Zip Code PA 19102				Amount of Each Disbursement this Period										
Purpose of Disbursement Contribution	10102		•						-	26	31.2	5			
Candidate Name			itegory Type	//											
Office Sought: House Disburs Senate President	sement For: Primary General Other (specify)	_													
State: District:															
Full Name (Last, First, Middle Initial) Friends of Guy Ciarrocchi					Date	of D	isbur	ser		.815	9				
Mailing Address 495 Virginia Ave					1 <sup>M</sup> 0	М	/ D	2	1 /	Ý Ž	0 0 8	3 Y			
City Paoli	State Zip Code PA 19301				Amou	int o	f Eac	h [	Disburs	emen	t this I	Period			
Purpose of Disbursement Contribution		Г		╗ ┗					10	0.00	0				
Candidate Name			itegory Type	//											
Office Sought: House Disburs Senate President	sement For:  Primary General  Other (specify) ▼	•													
State: District:															
SUBTOTAL of Disbursements This Page (optional	)			<u> </u>						41	31.2	5			
TOTAL This Period (last page this line number only	/)			•						41	31.2	5			

## SCHEDULE C (FEC Form 3X)

### L

Use separate schedule(s)

PAGE 36/37 FOR LINE 13 OF FORM 3X

LOANS		Detailed Summary Page								
NAME OF COMMITTEE (In Full) National Italian American Political Action Commi	ttee		Transactio	on ID: SC/10.4	1271					
LOAN SOURCE Full Name (Last, First, Middle Initial Amato Berardi	al)		Elec	tion: Primary General	+271					
Mailing Address 555 City Line Ave, Suite 770				Other (specify)	▼					
City Bala Cynwyd State	PA ZIP Code	19004	_							
Original Amount of Loan Cum	nulative Payment To Da	ate	Balance Ou	itstanding at Cl	ose of This Period					
2500.00		0.00			2500.00					
TERMS Date Incurred	Date Due		Interest Rate		Secured:					
0 3 D D Y Y Y Y Y 2 0 0 1			0.0000	% (apr)	Yes X No					
List All Endorsers or Guarantors (if any) to Loan Source	e									
Full Name (Last, First, Middle Initial)		Name of Emp	loyer							
Mailing Address	(	Occupation								
City State ZI	P Code C	Amount Guaranteed Outstanding:		0 0 0						
Full Name (Last, First, Middle Initial)		Name of Emp	loyer							
Mailing Address	C	Occupation								
City State ZI	P Code	Amount Guaranteed Outstanding:								
Full Name (Last, First, Middle Initial)	1	lame of Emp	loyer							
Mailing Address	C	Occupation								
City State ZI	P Code C	Amount Guaranteed Outstanding:			0 0					
Full Name (Last, First, Middle Initial)	N	Name of Emp	loyer							
Mailing Address	C	Occupation								
City State ZI	P Code C	Amount Guaranteed Outstanding:								
SUBTOTALS This Period This Page (optional)			•		2500.00					
TOTALS This Period (last page in this line only)			•		.00					
Carry outstanding balance only to LINE 3, Schedule D, fo	r this line. If no Schedu	le D, carry fo	rward to appropria	te line of Summ	ary.					

## SCHEDULE C (FEC Form 3X)

### L

Use separate schedule(s)

PAGE 37/37 FOR LINE 13 OF FORM 3X

LOANS	Detailed Summary Page
NAME OF COMMITTEE (In Full) National Italian American Political Action Committee	Transaction ID: SC/10.4284
LOAN SOURCE Full Name (Last, First, Middle Initial) AMATO BERARDI	Election: Primary General
Mailing Address 555 E. CITY LINA AVE.	Other (specify) ▼
City BALA CYNWYD State PA	ZIP Code 19004
Original Amount of Loan Cumulativ	ve Payment To Date Balance Outstanding at Close of This Period
7500.00	0.00 7500.00
	Date Due Interest Rate Secured:
06 D D Y Y Y Y 2001	0.0000 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Coo	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Coo	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Coo	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Coo	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	7500.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	